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S.D. SEC. OF STATE

STATE OF SOUTH DAKOTA

Statement of Legal Newspaper Ownership and Circulation

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER: Bison Courier		2. DATE: 10-3-12
3. FREQUENCY OF ISSUE: Weekly	3A. NO. OF ISSUES PUBLISHED ANNUALLY: 52	3B. ANNUAL SUBSCRIPTION PRICE: $34 local $39 other + tax

4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers): P.O. Box 429 122 A. West main St., Bison, Perkins Co., SD 57620-0429

5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers): on back

6. FULL NAME OF PUBLISHER: Donald Ravellette

7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.

FULL NAME — COMPLETE MAILING ADDRESS

on back

8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.

on back

9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run)	800	800
B. PAID AND/OR REQUESTED CIRCULATION 1. Sales through dealers and carriers, street vendors and counter sales.	99	93
2. Mail Subscription (Paid and or requested)	608	606
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)	707	699
D. FREE DISTRIBUTION 1. BY MAIL, CARRIER OR OTHER MEANS	55	56
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	—	—
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	762	755
F. COPIES NOT DISTRIBUTED 1. Office use, left over, unaccounted, spoiled after printing	32	38
2. Return from News Agents	6	7
G. TOTAL (Sum of E, F1 and F2 – Should equal net press run shown in A)	800	800

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public

I swear that the statements made by me are true, correct, and complete:

Donald Ravellette — (Signature)

Publisher — (Title)

State of South Dakota)

§

County of Hakon)

Sworn to before me this 3rd day of Oct, 2012

Jolene Haynes — Notary Public

My commission expires: 4-3-15

(Seal)

Form: SOS REC 051 7/2004

Owners:

Ravellette Publications, Inc.
P O Box 788
Philip, SD 57567-0788

Donald Ravellette
P O Box 633
Philip, SD 57567-0633

Bondholders, Mortgages & Other Security Holders:

First National Bank
P O Box 910
Philip, SD 57567-0910